

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	VT	62607	2-19-99
O.I.P.E. CLASSIFIER		Y	3-24-99
FORMALITY REVIEW	DMK	69169	4-1-99
	"	"	9-7-99

INDEX OF CLAIMS

✓ Rejected	N Non-elected
= Allowed	I Interference
-	(Through numeral)..... Canceled	A Appeal
+ Restricted	O Objected

Claim	Date
Final	
Original	
1	7/2/98
2	1/12/01
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Claim	Date
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Claim	Date
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If more than 150 claims or 10 actions
staple additional sheet here